| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF OHIO | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Identify Yourself | | |
|----|--------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | Writ | e the name that is on | Jerome | |
| | pictu | r government-issued ure identification (for mple, your driver's | First name | First name |
| | licer | nse or passport). | Middle name | Middle name |
| | Brin | g your picture | Gibson | |
| | | itification to your eting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | | other names you have d in the last 8 years | | |
| | | ude your married or den names. | | |
| 3. | you nun Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N) | xxx-xx-2940 | |

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|---|---|--|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) |
| | EINs | EINs |
| Where you live | 11317 Union Ave. | If Debtor 2 lives at a different address: |
| | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINS Where you live 11317 Union Ave. Cleveland, OH 44105 Number, Street, City, State & ZIP Code Cuyahoga County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filling this petition, I have lived in this district longer than in any other district. I have another reason. |

| Del | otor 1 Jerome Gibson | | | | Case number (if known) | |
|-----|---|--|---|---|--|---------------------------|
| Par | t 2: Tell the Court About Y | our Bankruptcy | Case | | | |
| 7. | The chapter of the Bankruptcy Code you are | | | of each, see <i>Notice Required by</i> a f page 1 and check the appropriate | 1 U.S.C. § 342(b) for Individuals Filing for Bar | าkruptcy |
| | choosing to file under | Chapter 7 | | | | |
| | | ☐ Chapter 11 | | | | |
| | | ☐ Chapter 12 | | | | |
| | | ☐ Chapter 13 | | | | |
| 8. | How you will pay the fee | about how order. If you a pre-prin | y you may pay. Typour attorney is subted address. | oically, if you are paying the fee yo mitting your payment on your beha | with the clerk's office in your local court for murself, you may pay with cash, cashier's check lf, your attorney may pay with a credit card or n, sign and attach the Application for Individua | k, or money check with |
| | | | | tailments. If you choose this options to the second section (Official Form 103A). | n, sign and attach the <i>Application for Individua</i> | iis to Pay |
| | | but is not applies to | required to, waive your family size ar | your fee, and may do so only if yound you are unable to pay the fee in | only if you are filing for Chapter 7. By law, a jurt income is less than 150% of the official poverinstallments). If you choose this option, you mal Form 103B) and file it with your petition. | erty line that |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | |
| | last 8 years? | ☐ Yes. | | | | |
| | | Distr | ict | When | Case number | |
| | | Distr | ict | When | Case number | |
| | | Distr | ict | When | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | |
| | | Debt | or | | Relationship to you | |
| | | Distr | ict | When | Case number, if known | |
| | | Debt | or | | Relationship to you | |
| | | Distr | ict | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. Go | to line 12. | | | |
| | residence : | ☐ Yes. Has | your landlord obta | ained an eviction judgment against | you? | |
| | | | No. Go to line | 12. | | |
| | | | Yes. Fill out Inthis bankruptc | | udgment Against You (Form 101A) and file it a | as part of |

| eb | tor 1 Jerome Gibson | | Case number (if known) |
|-----|---|------------------------------|--|
| - W | 2. Domost About Any Du | | Vou Our oo a Sala Branzistar |
| | Are you a sole proprietor of any full- or part-time | ■ No. | You Own as a Sole Proprietor Go to Part 4. |
| | business? | — 140. | |
| | | ☐ Yes. | Name and location of business |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, State & ZIP Code |
| | it to this petition. | | Check the appropriate box to describe your business: |
| | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) |
| | | | ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) |
| | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) |
| | | | □ None of the above |
| ,. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation in 11 U.S | filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of s, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedur. C. 1116(1)(B). |
| | For a definition of small | ■ No. | I am not filing under Chapter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. |
| | | ☐ Yes. | I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Cod |
| ar | Report if You Own or | Have Any | Hazardous Property or Any Property That Needs Immediate Attention |
| ١. | Do you own or have any | ■ No. | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is the hazard? |
| | public health or safety? Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? |
| | For example, do you own | | Where is the property? |
| | perishable goods, or livestock that must be fed, or a building that needs | | Where is the property? |
| | livestock that must be fed, | | Number, Street, City, State & Zip Code |

Debtor 1 Jerome Gibson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

| Deb | otor 1 Jerome Gibson | | | | Case number | er (if known) |
|-----|---|----------------------|--|--|---|---|
| Par | t 6: Answer These Questi | ions for R | eporting Purposes | | | |
| 16. | What kind of debts do you have? | 16a. | | ily consumer debts? Co | | ined in 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | 16b. | | ily business debts? Bus r investment or through th | | that you incurred to obtain siness or investment. |
| | | | ☐ No. Go to line 16c. | | | |
| | | | ☐ Yes. Go to line 17. | | | |
| | | 16c. | State the type of debts y | you owe that are not cons | sumer debts or busines | ss debts |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Cha | apter 7. Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses | ■ Yes. | are paid that funds will b | er 7. Do you estimate that be available to distribute t | | perty is excluded and administrative expenses ? |
| | are paid that funds will be available for distribution to unsecured creditors? | | ■ No □ Yes | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,00 | 00 | □ 25,001-50,000 |
| | you estimate that you owe? | 50-99 |) | 5001-10,0 | 000 | 5 0,001-100,000 |
| | | ☐ 100-1 ☐ 200-9 | | ☐ 10,001-25 | 5,000 | ☐ More than100,000 |
| 19. | How much do you | \$ 0 - \$ | | □ \$1,000,00 | 1 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | | 001 - \$100,000 | | 01 - \$50 million | ☐ \$1,000,000,001 - \$10 billion |
| | be worth: | | ,001 - \$500,000 | | 01 - \$100 million | □ \$10,000,000,001 - \$50 billion |
| | | □ \$500, | ,001 - \$1 million | □ \$100,000, | 001 - \$500 million | ☐ More than \$50 billion |
| 20. | How much do you | □ \$0 - \$ | \$50,000 | □ \$1,000,00 | 1 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | □ \$50,0 | 001 - \$100,000 | | 01 - \$50 million | □ \$1,000,000,001 - \$10 billion |
| | to be: | \$ 100, | ,001 - \$500,000 | | 01 - \$100 million | □ \$10,000,000,001 - \$50 billion |
| | | □ \$500, | ,001 - \$1 million | □ \$100,000, | 001 - \$500 million | ☐ More than \$50 billion |
| Par | 7: Sign Below | | | | | |
| For | you | I have ex | xamined this petition, and | I declare under penalty c | of perjury that the infor | mation provided is true and correct. |
| | | If I have United S | chosen to file under Chap tates Code. I understand | oter 7, I am aware that I m the relief available under | nay proceed, if eligible each chapter, and I cl | , under Chapter 7, 11,12, or 13 of title 11, hoose to proceed under Chapter 7. |
| | | | orney represents me and I nt, I have obtained and rea | | | ot an attorney to help me fill out this |
| | | I request | t relief in accordance with | the chapter of title 11, Ur | nited States Code, spe | ecified in this petition. |
| | | bankrupt and 3571 | tcy case can result in fines 1. | | | or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | | ome Gibson e Gibson | | Signature of Debto | or 2 |
| | | Signature | e of Debtor 1 | | - | |
| | | Executed | d on April 9, 2019 | | Executed on | |
| | | | MM / DD / YYYY | | MN | // DD / YYYY |

| Debtor 1 | Jerome Gibson | Case number (if known) | |
|----------|---------------|------------------------|--|
| | | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Michael S. Linn | Date | April 9, 2019 |
|--|---------------|---------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Michael S. Linn | | |
| Printed name | | |
| Michael S. Linn, Attorney | | |
| Firm name | | |
| 2012 West 25th St. | | |
| Suite 701 | | |
| Cleveland, OH 44113 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 216-491-5000 | Email address | mslinnlaw@gmail.com |
| 0023563 OH | | |
| Bar number & State | | |

| Fill | in this information to identi | fy your case: | | | |
|--------|---|---|---|-------------|--------------------------------|
| | tor 1 Jerome Gi | - | | | |
| Dak | First Name | Middle Name | Last Name | | |
| 1 | tor 2 use if, filing) First Name | Middle Name | Last Name | | |
| Uni | ed States Bankruptcy Court f | or the: NORTHERN DISTRIC | T OF OHIO | | |
| Cas | e number | | | | |
| (if kn | | | | _ | k if this is an ided filing |
| | | | | amer | aca ming |
| ∩f | icial Form 106Su | ım | | | |
| | | | nd Certain Statistical Information | | 12/15 |
| info | mation. Fill out all of your s original forms, you must fi | schedules first; then complete tell out a new Summary and check | e are filing together, both are equally responsible for the information on this form. If you are filing amend ck the box at the top of this page. | | iles after you file |
| | | | | | of what you own |
| 1. | Schedule A/B: Property (C 1a. Copy line 55, Total real | official Form 106A/B) estate, from Schedule A/B | | \$ | 0.00 |
| | 1b. Copy line 62, Total pers | onal property, from Schedule A/B | | \$ | 11,908.00 |
| | 1c. Copy line 63, Total of all | property on Schedule A/B | | \$ | 11,908.00 |
| Par | 2: Summarize Your Liab | ilities | | | |
| | | | | | iabilities nt you owe |
| 2. | | Have Claims Secured by Propertin Column A, Amount of claim, a | ty (Official Form 106D) t the bottom of the last page of Part 1 of <i>Schedule D</i> | \$ | 16,185.94 |
| 3. | | no Have Unsecured Claims (Officion Part 1 (priority unsecured clain | al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i> | \$ | 0.00 |
| | | | claims) from line 6j of Schedule E/F | \$ | 106,978.18 |
| | | | | | · |
| | | | Your total liabilities | \$ | 123,164.12 |
| Par | 3: Summarize Your Inco | ome and Expenses | | ļ | |
| 4. | Schedule I: Your Income (O | fficial Form 106I) | | Φ. | 1 062 09 |
| | | | le I | \$ | 1,063.98 |
| 5. | Schedule J: Your Expenses Copy your monthly expense | | | \$ | 1,330.00 |
| Par | 4: Answer These Quest | ions for Administrative and Sta | tistical Records | | |
| 6. | | tcy under Chapters 7, 11, or 13 to report on this part of the form. (| ? Check this box and submit this form to the court with yo | ur other sc | hedules. |
| | Yes | | | | |
| 7. | What kind of debt do you | have? | | | |
| | | | debts are those "incurred by an individual primarily for 9g for statistical purposes. 28 U.S.C. § 159. | a persona | , family, or |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

page 1 of 2

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Official Form 106Sum

Best Case Bankruptcy

Summary of Your Assets and Liabilities and Certain Statistical Information

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,028.34

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | or 1 | Jerome Gibson | | | |
|--|---|---|---|--|--|
| Debto | ur 0 | First Name | Middle Name Last Name | | |
| | or ∠ e, if filing) | First Name | Middle Name Last Name | | |
| Jnited | d States Ba | ankruptcy Court for the: NC | PRTHERN DISTRICT OF OHIO | | |
| | | | | | |
| ase | number _ | | | | ☐ Check if this is an amended filing |
| | | | | | |
| Offic | cial Fo | orm 106A/B | | | |
| Scł | าedul | le A/B: Propei | ty | | 12/15 |
| ink it forma | fits best. B | Be as complete and accurate as re space is needed, attach a se | ms. List an asset only once. If an asset fits in more than s possible. If two married people are filing together, both parate sheet to this form. On the top of any additional pa | are equally responsible for su | upplying correct |
| art 1: | Describe | Each Residence, Building, La | nd, or Other Real Estate You Own or Have an Interest In | | |
| Do y | ou own or l | have any legal or equitable into | erest in any residence, building, land, or similar property? | ? | |
| ■ N | lo. Go to Pai | rt 2. | | | |
| ПΥ | es. Where i | is the property? | | | |
| | | | | | |
| | Dagariba | | | | |
| o yo i omeo | u own, lea | | ole interest in any vehicles, whether they are regist so report it on Schedule G: Executory Contracts and vehicles, motorcycles | | ehicles you own that |
| o yo i omeo | u own, lea ne else dri rs, vans, tr lo 'es | se, or have legal or equitak ves. If you lease a vehicle, a | so report it on Schedule G: Executory Contracts and | Unexpired Leases. Do not deduct secured cl | laims or exemptions. Put |
| o you omeo Car | u own, lead one else drivers, vans, tr volo volo Make: | se, or have legal or equitak ves. If you lease a vehicle, a rucks, tractors, sport utility | so report it on Schedule G: Executory Contracts and vehicles, motorcycles | Do not deduct secured countries amount of any secure | ŕ |
| o you omeo Car | u own, lea ne else dri s, vans, tr No 'es Make: Model: Year: | se, or have legal or equitak ves. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured countries amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D</i> : |
| o you omeo Car | u own, leadine else drives, vans, trado Ves Make: Model: Year: Approximate | se, or have legal or equital ves. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured control the amount of any secure Creditors Who Have Class | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. |
| omeo Car | u own, leadine else drives, vans, trado Ves Make: Model: Year: Approximat Other inform | se, or have legal or equital ves. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 mation: | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clar | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| o you omeo Car | u own, leadine else drives, vans, trado Ves Make: Model: Year: Approximat Other inform | se, or have legal or equital ves. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clar | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| o you pomeo | w own, leadene else drives, vans, trong else drives. Make: Model: Year: Approximate Other inform. VIN#:3G | se, or have legal or equital ves. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 mation: YFNAEY8BS600237 | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Clar Current value of the entire property? \$7,000.00 | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$7,000.00 |
| o you omeo Car | u own, lea ne else dri rs, vans, tr No 'es Make: Model: Year: Approximat Other inforr VIN#:3G | se, or have legal or equital ves. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 mation: YFNAEY8BS600237 | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one | Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property? \$7,000.00 Do not deduct secured of the amount of any secure of the entire property? | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$7,000.00 |
| O you come o | u own, lea ne else dri rs, vans, tr No 'es Make: Model: Year: Approximat Other inforr VIN#:3G' | se, or have legal or equital ves. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 mation: YFNAEY8BS600237 Jaguar | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$7,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clar. | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$7,000.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. |
| O you come o | u own, lea ne else dri rs, vans, tr No 'es Make: Model: Year: Approximat Other inforr VIN#:3G' | se, or have legal or equitatives. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 mation: YFNAEY8BS600237 Jaguar 4S 1999 | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property? \$7,000.00 Do not deduct secured of the amount of any secure of the entire property? | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$7,000.00 |
| O you come o | wown, lead in elese drives, vans, troves Make: Model: Year: Approximat Other inform VIN#:3G | se, or have legal or equitatives. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 mation: YFNAEY8BS600237 Jaguar 4S 1999 te mileage: 130,000 | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$7,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$7,000.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| O you come o | wown, leadine else drives, vans, troloves Make: Model: Year: Approximat Other infort VIN#:3G Make: Model: Year: Approximat Other infort VIN#:SA | se, or have legal or equitatives. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 mation: YFNAEY8BS600237 Jaguar 4S 1999 te mileage: 130,000 | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$7,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$7,000.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| Car Representation of the content o | wown, leadine else drives, vans, troloves Make: Model: Year: Approximat Other infort VIN#:3G Make: Model: Year: Approximat Other infort VIN#:SA | se, or have legal or equitatives. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 mation: YFNAEY8BS600237 Jaguar 4S 1999 te mileage: 130,000 mation: JKX604XXC856202 | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another About 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$7,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$7,000.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| o you come o | wown, leadine else drives, vans, troloves Make: Model: Year: Approximat Other infort VIN#:3G Make: Model: Year: Approximat Other infort VIN#:SA | se, or have legal or equitatives. If you lease a vehicle, a rucks, tractors, sport utility Cadillac SRX 2011 te mileage: 148,000 mation: YFNAEY8BS600237 Jaguar 4S 1999 te mileage: 130,000 mation: JKX604XXC856202 | wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$7,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$7,000.0 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? |

| Debtor | Jerome Gibs | Case number (if known) | |
|------------------------|--|--|---|
| | | the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=> | \$7,050.00 |
| Dart 2: | Doscribo Vour Porso | nal and Household Items | |
| | | egal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| <i>Exar</i> □ No | | urnishings ces, furniture, linens, china, kitchenware | |
| | | Used furniture and other unsecured household goods | \$175.00 |
| □ No | nples: Televisions a including cell | nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music con phones, cameras, media players, games | ollections; electronic devices |
| | | 1 older Samsung tablet computer | \$15.00 |
| | | 1 Samsung Galaxy J& cellphone | \$50.00 |
| Exar No Ye 9. Equip | other collection ones. Describe oment for sports ar | figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, ons, memorabilia, collectibles nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a | |
| ■ No | musical instru | | |
| ■ No | amples: Pistols, rifles | s, shotguns, ammunition, and related equipment | |
| | amples: Everyday clo | othes, furs, leather coats, designer wear, shoes, accessories | |
| | | Used clothing | \$100.00 |
| ■ No | amples: Everyday je | welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g | old, silver |
| Exa ■ No | a-farm animals amples: Dogs, cats, l o es. Describe | birds, horses | |

| Debtor 1 | Jerome Gibson | | Case number (if known) | |
|--------------------------|---|---|--|---|
| 14. Any o ■ No | ther personal and ho | ousehold items you o | did not already list, including any health aids you did not list | |
| | . Give specific inform | ation | | |
| | | • | m Part 3, including any entries for pages you have attached | \$340.00 |
| Part 4: Da | escribe Your Financial | Assats | _ | |
| | | | st in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No | | | r home, in a safe deposit box, and on hand when you file your petition | |
| ■ res. | | | | |
| | | | Cash | \$10.00 |
| | , 5, | 0 , | accounts; certificates of deposit; shares in credit unions, brokerage hou unts with the same institution, list each. | uses, and other similar |
| Yes. | | | Institution name: | |
| | 1 | Checking & 7.1. Savings | Ohio Educational Credit Union savings and checking account both overdrawn. No money in accounts | \$0.00 |
| | 1 | 7.2. Checking | Visa USA Inc. Rapid!\$ debit card payroll account | \$8.00 |
| | | ublicly traded stock estment accounts with | s n brokerage firms, money market accounts | |
| ☐ Yes. | | Institution or issu | uer name: | |
| | ublicly traded stock venture | and interests in inco | orporated and unincorporated businesses, including an interest ir | ı an LLC, partnership, and |
| ☐ Yes. | . Give specific information | ation about them Name of entity: | % of ownership: | |
| Nego | <i>tiable instrument</i> s incl | ude personal checks, | egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. It transfer to someone by signing or delivering them. | |
| ☐ Yes. | . Give specific informa | ation about them Issuer name: | | |
| | ment or pension accuples: Interests in IRA, | | k), 403(b), thrift savings accounts, or other pension or profit-sharing pla | ins |
| Yes. | List each account se | parately. Type of account: | Institution name: | |
| | • | SERS | School Employees Retirement System pension account (SERS) | \$3,500.00 |

| De | ebtor 1 Jerome | Gibson | | Case | number (if known) | |
|-----|--|--|--|------------------------------|---------------------------|--|
| 22. | | nused deposits you ha | ave made so that you may contir repaid rent, public utilities (electr | | | or others |
| | ☐ Yes | | Institution na | me or individual: | | |
| 23. | _ ` | act for a periodic paym | nent of money to you, either for li | fe or for a number of year | rs) | |
| | ■ No □ Yes | Issuer name and de | escription. | | | |
| 24. | | cation IRA, in an acc)(1), 529A(b), and 529 | count in a qualified ABLE prog (b)(1). | ram, or under a qualifie | d state tuition progran | n. |
| | ☐ Yes | Institution name an | d description. Separately file the | records of any interests. | 11 U.S.C. § 521(c): | |
| 25. | Trusts, equitable | or future interests in | property (other than anything | listed in line 1), and righ | nts or powers exercisa | able for your benefit |
| | ■ No□ Yes. Give specif | ic information about th | em | | | |
| | Examples: Interne No | t domain names, webs | secrets, and other intellectua sites, proceeds from royalties and | | | |
| | | ic information about th | | | | |
| | Examples: Building ■ No | ses, and other generary generates generates, exclusive lick fictions in the second sec | enses, cooperative association | holdings, liquor licenses, p | professional licenses | |
| М | oney or property ov | wed to you? | | | | Current value of the |
| | | · | | | | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed □ No ■ Yes. Give specifi | • | em, including whether you alread | dy filed the returns and the | e tax years | |
| | | | 2017 & 2018 Federal incom will probably be offse | | Federal | \$1,000.00 |
| | Family support Examples: Past do No Yes. Give specifi | | y, spousal support, child suppor | t, maintenance, divorce se | ettlement, property settl | ement |
| 30. | | | rance payments, disability benef ade to someone else | its, sick pay, vacation pay | , workers' compensation | on, Social Security |
| | ☐ Yes. Give specif | ic information | | | | |
| 31. | Interests in insura Examples: Health, ☐ No | | ance; health savings account (H | SA); credit, homeowner's, | or renter's insurance | |
| | ■ Yes. Name the in | nsurance company of e Company n | each policy and list its value. ame: | Beneficiary: | | Surrender or refund value: |

| Debtor 1 | Jerome Gibson | | Case number (if known) | |
|------------------|--|---|---|-----------------------|
| | | Group term life insurance policy insuring debtor's life obtained through employment. Beneficiary is debtor's wife | Wife | \$0.00 |
| If you somed | | at is due you from someone who has died a living trust, expect proceeds from a life insurance p ation | olicy, or are currently entitled to rec | eive property because |
| Examp ■ No | | s, whether or not you have filed a lawsuit or made by ment disputes, insurance claims, or rights to sue | e a demand for payment | |
| ■ No | contingent and unlice Describe each claim | quidated claims of every nature, including counter | claims of the debtor and rights to | o set off claims |
| ■ No | nancial assets you d | | | |
| | | l of your entries from Part 4, including any entries ber here | | \$4,518.00 |
| Part 5: De | scribe Any Business-R | elated Property You Own or Have an Interest In. List any | real estate in Part 1. | |
| - | , , | or equitable interest in any business-related property? | | |
| | o to Part 6. Go to line 38. | | | |
| | | Commercial Fishing-Related Property You Own or Have a est in farmland, list it in Part 1. | an Interest In. | |
| ■ No. | Jown or have any le Go to Part 7. Go to line 47. | gal or equitable interest in any farm- or commerci | al fishing-related property? | |
| Part 7: | Describe All Propert | y You Own or Have an Interest in That You Did Not List A | Above | |
| | | y of any kind you did not already list? country club membership | | |
| | Give specific informa | tion | | |
| 54. Add 1 | the dollar value of al | l of your entries from Part 7. Write that number he | ere | \$0.00 |

| Deb | tor 1 Jerome Gibson | | Case number (if known) | |
|------|--|-------------|------------------------------|-------------|
| Part | 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$7,050.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$340.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$4,518.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$11,908.00 | Copy personal property total | \$11,908.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$11,908.00 |

Official Form 106A/B Schedule A/B: Property page 6 Best Case Bankruptcy

| Fill in this information to identify your case: | | | | | | | |
|---|---------------|-------------------|-----------|---------------------|--------------|--|--|
| Debtor 1 | Jerome Gibson | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF OHIO | | | | |
| Case number | | | | ☐ Check i amende | f this is an | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exemptions are you claiming | ? Check one only | , even if your spouse is filing with you. |
|----|--|------------------|---|
|----|--|------------------|---|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property | | | Specific laws that allow exemption | |
|---|-------------------------------------|-----|---|---|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 2011 Cadillac SRX 148,000 miles VIN#:3GYFNAEY8BS600237 | \$7,000.00 | - | \$4,000.00 | Ohio Rev. Code Ann. § 2329.66(A)(2) |
| Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020:00(7)(2) |
| Used furniture and other unsecured household goods | \$175.00 | | \$175.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020:00(^)(*)(a) |
| 1 older Samsung tablet computer Line from Schedule A/B: 7.1 | \$15.00 | | \$15.00 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| Ellie Holli Goriodale 775. TT | | | 100% of fair market value, up to any applicable statutory limit | 2525.65(1.5)(1.6) |
| 1 Samsung Galaxy J& cellphone Line from Schedule A/B: 7.2 | \$50.00 | | \$50.00 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| | | | 100% of fair market value, up to any applicable statutory limit | 222333(-)(-3) |
| Used clothing Line from Schedule A/B: 11.1 | \$100.00 | | \$100.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) |
| | | | 100% of fair market value, up to any applicable statutory limit | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

| of the property and line on a lists this property ule A/B: 16.1 a USA Inc. Rapid!\$ proll account ule A/B: 17.2 | Current value of the portion you own Copy the value from Schedule A/B \$10.00 | | standard point of the exemption you claim eck only one box for each exemption. \$10.00 100% of fair market value, up to any applicable statutory limit | Ohio Rev. Code Ann. § 2329.66(A)(3) |
|---|---|---|---|---|
| a USA Inc. Rapid!\$ | \$10.00 | • | \$10.00 100% of fair market value, up to | |
| a USA Inc. Rapid!\$ | | | 100% of fair market value, up to | |
| a USA Inc. Rapid!\$ | \$8.00 | | | 2020.00(/1)(0) |
| roll account | \$8.00 | | | |
| ule A/B: 17.2 | | | \$8.00 | Ohio Rev. Code Ann. § 2329.66(A)(3) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| SERS: School Employees Retirement System pension account (SERS) | | | \$3,500.00 | Ohio Rev. Code Ann. §§ 3307.71, 3309.66 |
| from Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | , |
| & 2018 Federal income | \$1,000.00 | | \$482.00 | Ohio Rev. Code Ann. § 2329.66(A)(3) |
| from Schedule A/B: 28.1 | | | 100% of fair market value, up to any applicable statutory limit | , , , , , , , , , , , , , , , , , , , |
| & 2018 Federal income | \$1,000.00 | | \$518.00 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| ule A/B: 28.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(//)(//0) |
| e insurance policy | \$0.00 | | \$0.00 | Ohio Rev. Code Ann. §§ 2329.66(A)(6)(c), 3917.05 |
| oyment. Beneficiary is Vife ule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| e insurance policy | \$0.00 | | \$0.00 | Ohio Rev. Code Ann. §§ 2329.66(A)(6)(b), 3911.10, |
| through employment. Beneficiary is debtor's wife Beneficiary: Wife Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | 3911.12, 3911.14 |
| | & 2018 Federal income ill probably be offset ule A/B: 28.1 & 2018 Federal income ill probably be offset ule A/B: 28.1 & 2018 Federal income ill probably be offset ule A/B: 28.1 e insurance policy or's life obtained byment. Beneficiary is vife ule A/B: 31.1 e insurance policy or's life obtained byment. Beneficiary is vife ule A/B: 31.1 g a homestead exemption of a homestead exemption of a homestead exemption of a life ule A/B: 31.1 | & 2018 Federal income ill probably be offset ule A/B: 28.1 & 2018 Federal income ill probably be offset ule A/B: 28.1 & 2018 Federal income ill probably be offset ule A/B: 28.1 e insurance policy pr's life obtained pyment. Beneficiary is Vife ule A/B: 31.1 e insurance policy pr's life obtained pyment. Beneficiary is Vife ule A/B: 31.1 g a homestead exemption of more than \$170,35 | & 2018 Federal income ill probably be offset ule A/B: 28.1 & 2018 Federal income ill probably be offset ule A/B: 28.1 & 2018 Federal income ill probably be offset ule A/B: 28.1 e insurance policy or's life obtained oyment. Beneficiary is life ule A/B: 31.1 e insurance policy or's life obtained oyment. Beneficiary is life ule A/B: 31.1 g a homestead exemption of more than \$170,350? | 100% of fair market value, up to any applicable statutory limit |

| Fill in | this informa | ation to identify you | ır case: | | | |
|----------|-------------------------------------|----------------------------|--|--------------------------|--|--------------------------|
| Debto | or 1 | Jerome Gibson | | | | |
| | | First Name | Middle Name Last Name | | - | |
| Debto | | | | | | |
| (Spous | e if, filing) | First Name | Middle Name Last Name | | | |
| Unite | d States Bank | cruptcy Court for the | NORTHERN DISTRICT OF OHIO | | - | |
| Case | number | | | | | |
| (if know | | | | | ☐ Check | if this is an |
| | | | | | amend | ded filing |
| O#: ∙ | iol Form | 10CD | | | | |
| | cial Form | | | | | |
| Sch | edule [| D: Creditors | Who Have Claims Secur | ed by Propert | У | 12/15 |
| is need | | | If two married people are filing together, both are out, number the entries, and attach it to this form | | | |
| 1. Do a | ny creditors h | ave claims secured by | y your property? | | | |
| | No. Check t | his box and submit t | his form to the court with your other schedules | s. You have nothing else | to report on this form. | |
| | Yes. Fill in a | all of the information | below. | | | |
| Part ' | List All | Secured Claims | | | | |
| 2. List | t all secured cl | aims. If a creditor has a | more than one secured claim, list the creditor separa | Column A | Column B | Column C |
| for each | ch claim. If mor | e than one creditor has | s a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name. | | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 | Credit Acce | eptance Corp. | Describe the property that secures the claim: | \$12,065.72 | Unknown | Unknown |
| | Creditor's Name | | 2003 Ford Explorer 4D XLT 4wd VIN#1FMZU73K63UC01587 Dedcut \$1,250 for 160,000 miles. Average trade-in condition NADA \$4,200 - \$4,450 - \$7,325 This vehicle has been repossessed by Credit Acceptance and scheduled for sale with minimum bid | | | |
| | 25505 W. To Southfield, | welve Mile Rd. MI 48034 | As of the date you file, the claim is: Check all that apply. Contingent | i e | | |
| | Number, Street, C | ity, State & Zip Code | Unliquidated | | | |
| Who | owes the deb | t? Check one | ☐ Disputed Nature of lien. Check all that apply. | | | |
| _ | btor 1 only | 5 . | ☐ An agreement you made (such as mortgage or | secured | | |
| | btor 2 only | | car loan) | | | |
| _ | ebtor 1 and Deb | tor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien |) | | |
| _ | | debtors and another | ☐ Judgment lien from a lawsuit | '' | | |
| □ сн | neck if this clai community debt | m relates to a | 3 | se money | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number

4424

page 1 of 3

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Date debt was incurred 07/11/2011

| Debtor 1 Jerome Gibson | | Case | number (if known) | | |
|---|--|---------------------|-------------------|------------|---------|
| First Name Middle N | ame Last Name | _ | , , | | |
| 2.2 Eagle Loan | Describe the property that secures | the claim: | \$2,551.24 | \$7,000.00 | \$0.00 |
| Creditor's Name | 2011 Cadillac SRX 148,000 r | | Ψ2,001124 | Ψ1,000.00 | ΨΟ.ΟΟ |
| | VIN#:3GYFNAEY8BS600237 | , | | | |
| 5961 Andrews Road Mentor on the Lake, OH | As of the date you file, the claim is: | Check all that | | | |
| 44060 | apply. Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| Who owes the debt? Check one. | Disputed | | | | |
| _ | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | An agreement you made (such as car loan) | mortgage or secured | | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | onanie 3 non | | | |
| ☐ Check if this claim relates to a | ☐ Other (including a right to offset) | | | | |
| community debt | | | | | |
| Date debt was incurred 04/2015 | Last 4 digits of account num | ber <u>1923</u> | | | |
| Integrity Funding Ohio | | | | | |
| LLC | Describe the property that secures | the claim: | \$0.00 | \$50.00 | \$0.00 |
| Creditor's Name | 1999 Jaguar 4S 130,000 mile | es | | | |
| | VIN#:SAJKX604XXC856202 | | | | |
| 24.100 | As of the date you file, the claim is: | | | | |
| 84 Villa Road | apply. | | | | |
| Greenville, SC 29615 | ☐ Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | ☐ An agreement you made (such as | mortgage or secured | | | |
| Debtor 2 only | car loan) | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | ☐ Other (including a right to offset) | | | | |
| Date debt was incurred | Last 4 digits of account num | ber | | | |
| 2.4 Progressive Finance | Describe the property that secures | the claim: | \$1,568.98 | Unknown | Unknown |
| Creditor's Name | Sofa, loveseat, chair, table a | | <u> </u> | | |
| | stools recently purchased for | | | | |
| | secured by Furniture & Matt | tress | | | |
| 11629 South 700 East, | liquidators. As of the date you file, the claim is: | Chaple all that | | | |
| Suite 250 | apply. | Check all that | | | |
| Draper, UT 84020 | Contingent | | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | ☐ An agreement you made (such as | mortgage or secured | | | |
| Debtor 2 only | car loan) | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| \square At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | Purchase Mon | еу | | |
| Date debt was incurred 11/27/2011 | Last 4 digits of account num | ber Unknown | | | |
| | | | | | |

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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| Debtor 1 | Jerome Gibs | son | | Case number (if | known) | |
|------------|---|---|--|----------------------------|--------------------------|-----------------------------|
| | First Name | Middle Name | Last Name | | | |
| Add the | dollar value of yo | our entries in Column A on t | his page. Write that number her | re: | \$16,185.94 | |
| | the last page of y at number here: | our form, add the dollar val | lue totals from all pages. | | \$16,185.94 | |
| Part 2: | List Others to E | Be Notified for a Debt Th | at You Already Listed | | | |
| rying to c | ollect from you for reditor for any of | or a debt you owe to someo | out your bankruptcy for a debt t one else, list the creditor in Part on Part 1, list the additional credit | 1, and then list the colle | ection agency here. S | Similarly, if you have more |
| | | st, City, State & Zip Code Services, Inc. | | On which line in Part 1 d | lid you enter the credit | or? 2.2 |
| 57 | 39 Mayfield R | oad. | | Last 4 digits of account r | number | |

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property Official Form 106D Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Cleveland, OH 44124

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| Fill in | this informa | ation to identify your c | ase: | | | | | |
|----------------------------------|--|---|---|---|-------------------------------------|--|---------------------------------|--|
| Debtor | · 1 | Jerome Gibson First Name | Middle Na | me | Last Name | | | |
| Debtor (Spouse | | First Name | Middle Na | | Last Name | | | |
| | | kruptcy Court for the: | NORTHERN | DISTRICT OF | ОНЮ | | | |
| Case r | number | | | - | | | _ | Check if this is an amended filing |
| Sche Be as co | omplete and | F: Creditors W | Part 1 for cred | ditors with PRIOR | RITY claims and | Part 2 for creditors with NOI | NPRIORITY cla | 12/15 ims. List the other party to |
| Schedul Schedul left. Atta | le G: Executorile D: Creditor ach the Contind case numl | ory Contracts and Unexpi rs Who Have Claims Secu | red Leases (Of ired by Propert e. If you have n | ficial Form 106G) y. If more space i o information to | . Do not include is needed, copy | contracts on Schedule A/B: any creditors with partially the Part you need, fill it out, do not file that Part. On the | secured claims number the en | s that are listed in stries in the boxes on the |
| | | s have priority unsecured | | | | | | |
| _ | No. Go to Pa | | J | • | | | | |
| | Yes. | | | | | | | |
| Part 2: | | of Your NONPRIORITY | Y Unsecured | Claims | | | | |
| 3. Do | any creditor | s have nonpriority unsec | ured claims aga | ainst you? | | | | |
| | No. You have | e nothing to report in this pa | art. Submit this fo | orm to the court wi | th your other sche | edules. | | |
| _ | Yes. | | | | , | | | |
| uns tha | secured claim, | , list the creditor separately | for each claim. | For each claim list | ed, identify what t | b holds each claim. If a credi type of claim it is. Do not list of three nonpriority unsecured of | laims already in | cluded in Part 1. If more |
| | | | | | | | | Total claim |
| 4.1 | ACE Cas | sh Express, Inc. | | Last 4 digits of a | ccount number | 6001 | | \$1,119.58 |
| | Nonpriority 0 | Creditor's Name ockside Rd. | | When was the de | ebt incurred? | 08/27/2011 | | |
| | Number Str | OH 44146 eet City State Zip Code eet the debt? Check one. | | As of the date yo | u file, the claim | is: Check all that apply | | |
| | Debtor 1 | only | | ☐ Contingent | | | | |
| | Debtor 2 | ? only | | ☐ Unliquidated | | | | |
| | Debtor 1 | and Debtor 2 only | | ☐ Disputed | | | | |
| | ☐ At least | one of the debtors and ano | uici | Type of NONPRIC | ORITY unsecured | d claim: | | |
| | | f this claim is for a comm | iunity | ☐ Student loans | | | | |
| | debt Is the claim | subject to offset? | | Obligations ari report as priority c | sing out of a sepa laims | ration agreement or divorce t | hat you did not | |
| | ■ No | - | | | | g plans, and other similar deb | ots | |
| | ☐ Yes | | | Other. Specify | Payday loa | n | | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| | | |
|--|---|-------------|
| Advance America Nonpriority Creditor's Name | Last 4 digits of account number 5037 | \$593.59 |
| 9065 Darrow Rd. | When was the debt incurred? 09/02/2011 | |
| Twinsburg, OH 44087 | | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | _ | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Agreement No. 77899873 | |
| Advance National Cash | Last 4 digits of account number 5930 | \$546.18 |
| Nonpriority Creditor's Name 21638 Libby Rd, Unit#432 Maple Heights, OH 44137 | When was the debt incurred? unkown | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Money Loaned | |
| AmeriCredit | Last 4 digits of account number 7673 | \$13,763.10 |
| Nonpriority Creditor's Name Internal Collections Dept. POB 183123 | When was the debt incurred? 2011 | |
| Arlington, TX 76096 | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Deficiency due after repossession and sale Other. Specify of 2008 Jeep | |

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

| Debtor | 1 Jerome Gibson | Case number (if known) | |
|--------|---|--|------------|
| 4.5 | AT&T | Last 4 digits of account number 9571 | \$193.02 |
| | Nonpriority Creditor's Name POB 5080 | When was the debt incurred? 2011 | |
| | Carol Stream, IL 60197 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Phone service | |
| 4.6 | AT&T | Last 4 digits of account number 5307 | \$1,574.15 |
| | Nonpriority Creditor's Name | | |
| | POB 6416 Carol Stream, IL 60197 | When was the debt incurred? 2011 | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | | |
| | ☐ Yes | Other. Specify Phone service | |
| 4.7 | AT&T-Uverse | Last 4 digits of account number 0200 | \$646.39 |
| | Nonpriority Creditor's Name % Bay Area Credit Service LLC 1901 W. 10th St. | When was the debt incurred? | |
| | Antioch, CA 94509 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | — NO | _ Cable TV service | |
| | Yes | Other. Specify Client Acct. No. 004110260 | |

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

| Debto | r 1 Jerome Gibson | | Case number (if known) | |
|-------|--|---|--|------------|
| 4.8 | Capital One | Last 4 digits of account number | 0223 | \$0.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 | When was the debt incurred? | Opened 12/15 Last Active 12/21/16 | · · |
| | Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Credit Card | <u> </u> | |
| 4.9 | Cashland Nonpriority Creditor's Name | Last 4 digits of account number | 3597 | \$1,160.99 |
| | 12548 Rockside Rd. Garfield Heights, OH 44125 | When was the debt incurred? | 07/29/2011 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Payday loa | n | |
| 4.1 | Chase Bank | | 2300 | \$700.00 |
| 0 | Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ700.00 |
| | OH1-1188 340 S. Cleveland Ave., Bldg 370 Westerville, OH 43081 | When was the debt incurred? | unknown | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Overdraft | | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| Chase Card Services | Last 4 digits of account number | 7992 | \$17,379.00 |
|--|--|---|-------------|
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 | When was the debt incurred? | Opened 8/22/95 Last Active 5/24/16 | |
| Wilmington, DE 19850 | — As of the data was file the alaim i | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans | aration agreement or divorce that you did not | |
| ls the claim subject to offset? | report as priority claims | tration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Checksmart 111 | Last 4 digits of account number | 0522 | \$800.00 |
| Nonpriority Creditor's Name 5805 Mayfield Rd. | When was the debt incurred? | 12/18/2010 | ***** |
| Mayfield Heights, OH 44124 Number Street City State Zip Code | As of the date you file, the claim i | in Chack all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim | в. Спеск ан так арру | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| ☐ Yes | Other. Specify Payday loa | n | |
| Citi/Sears | Last 4 digits of account number | 9827 | \$6,483.00 |
| Nonpriority Creditor's Name Citibank/Centralized Bankruptcy | - When we the dahk in some 10 | Opened 3/16/12 Last Active | |
| Po Box 790034 St Louis, MO 63179 | When was the debt incurred? | 6/08/16 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Card | 1 | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| 1 Jerome Gibson | | Case number (if known) | |
|---|--|---|------------|
| Citibank/Best Buy | Last 4 digits of account number | 2794 | \$1,228.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 790441 | When was the debt incurred? | Opened 02/14 Last Active 2/09/19 | |
| St. Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Charge Acc | count | |
| City of Cleveland | Last 4 digits of account number | 5077 | \$160.00 |
| Nonpriority Creditor's Name Photo Enforcement | When was the debt incurred? | unknown | |
| % Mrs Associates, Inc. 1930 Olney Ave. | when was the dept incurred? | unknown | |
| Cherry Hill, NJ 08003 | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Speeding T | icket | |
| City of East Cleveland | Last 4 digits of account number | 3242 | \$145.00 |
| Nonpriority Creditor's Name Automated Ticket POB 742503 | When was the debt incurred? | 11/18/2010 | |
| Cincinnati, OH 45274 | | | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim. | |
| At least one of the debtors and another | Student loans | u Ciumili. | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □ Yes | ■ Other. Specify daugther w | ticket of some sort while | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| CK Marketing | Last 4 digits of account number | 0SOF | \$411.0 |
|---|---|---|------------|
| Nonpriority Creditor's Name 4342 East 31st Place Yuma, AZ 85365 | When was the debt incurred? | 2011 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans ☐ Obligations arising out of a sena | aration agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| No | \square Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Payday loa | n | |
| Eastside Lender | Last 4 digits of account number | 2940 | \$842.50 |
| Nonpriority Creditor's Name 2711 Centerville Rd., Ste 120-5900 Wilmington, DE 19808 | When was the debt incurred? | 2011 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt | Student loans | | |
| s the claim subject to offset? | Obligations arising out of a separe report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Money Loa | ned | |
| ERC/Enhanced Recovery Corp | Last 4 digits of account number | 3256 | \$1,796.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy | When was the debt incurred? | Opened 10/18 | |
| 8014 Bayberry Road | | | |
| Jacksonville, FL 32256 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | , | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt s the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Collection | Attornev Tmobile | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| Debtor | 1 Jerome Gibson | | Case number (if known) | |
|--------|--|---|--|------------|
| 4.2 | ERC/Enhanced Recovery Corp | Last 4 digits of account number | 0413 | \$1,420.00 |
| U | Nonpriority Creditor's Name Attn: Bankruptcy 8014 Bayberry Road | When was the debt incurred? | Opened 07/16 | |
| | Jacksonville, FL 32256 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Collection | Attorney Sprint | |
| 4.2 | ERC/Enhanced Recovery Corp | Last 4 digits of account number | 3354 | \$367.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy 8014 Bayberry Road | When was the debt incurred? | Opened 11/17 | |
| | Jacksonville, FL 32256 Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| | Who incurred the debt? Check one. | <u>_</u> | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | Lateta | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | <u></u> | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharin | a plane, and other similar debts | |
| | ■ No | | Attorney Charter | |
| | Yes | Other. Specify Communic | ations | |
| 4.2 | Everest Cash Advance | Last 4 digits of account number | 2940 | \$765.00 |
| | Nonpriority Creditor's Name 300 Creek View Rd. Newark, DE 19711 | When was the debt incurred? | 2011 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharin | | |
| | ☐ Yes | Other. Specify Internet loa | ın | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| 1 Jerome Gibson | | Case number (if known) | |
|---|---|--|---------------------------------------|
| Fifth Third Bank NE Ohio | Last 4 digits of account number | 4103 | \$959.20 |
| Nonpriority Creditor's Name % Complete Payment Recovery Services, Inc. 3500 5th St. Northport, AL 35476 | When was the debt incurred? | 2011 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| First Premier Bank | Last 4 digits of account number | 8519 | \$552.00 |
| Nonpriority Creditor's Name | | | · · · · · · · · · · · · · · · · · · · |
| Attn: Bankruptcy Po Box 5524 | When was the debt incurred? | Opened 11/25/15 Last Active 12/21/16 | |
| Sioux Falls, SD 57117 Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | , | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| First Promise Poul | | 1227 | £240.00 |
| First Premier Bank Nonpriority Creditor's Name | Last 4 digits of account number | | \$310.00 |
| Attn: Bankruptcy Po Box 5524 | When was the debt incurred? | Opened 11/15 Last Active 7/22/16 | |
| Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □Yes | ■ Other. Specify Credit Card | 1 | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| 1 Jerome Gibson | | Case number (if known) | |
|--|---|---|----------------|
| First Premier Bank Nonpriority Creditor's Name | Last 4 digits of account number | 1337 | \$400.00 |
| PO Box 5514 3820 N. Louise Ave. | When was the debt incurred? | 2015 | |
| Sioux Falls, SD 57117-5500 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharing | | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Goldberg Companies, Inc. | Last 4 digits of account number | t108 | \$2,708.63 |
| Nonpriority Creditor's Name 25101 Chagrin Blvd. #300 PO Box 22220 | When was the debt incurred? | 2011 | |
| Beachwood, OH 44122 | _ | | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d alaim. | |
| At least one of the debtors and another | Student loans | a ciaim: | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| ☐ Yes | Other. Specify Rent | | |
| | | 7044 | * 00.06 |
| Homecare Collection Service Nonpriority Creditor's Name | Last 4 digits of account number | 7911 | \$69.00 |
| POB 2484 Akron, OH 44309 | When was the debt incurred? | unknown | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | ☐ Debts to pension or profit-sharin | | |
| Yes | ■ Other. Specify Collection | for ?? | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| I C System Inc | Last 4 digits of account number | 7550 | \$198.0 |
|---|--|---|------------|
| Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 64378 | When was the debt incurred? | Opened 12/18 | |
| St. Paul, MN 55164 | | _ | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Collection | Attorney Dominion Energy Ohio | |
| Internal Revenue Service | Last 4 digits of account number | 2940 | \$25,000.0 |
| Nonpriority Creditor's Name Centralized Insolvency Operations PO Box 7346 | When was the debt incurred? | 2002-2008 | |
| Philadelphia, PA 19114-7346 | | | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| ls the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | Other. Specify Federal inc | come taxes | |
| JP Morgan Chase Bank | Last 4 digits of account number | 4973 | \$9,654.9 |
| Nonpriority Creditor's Name 1111 Polaris Park Way | When was the debt incurred? | 2011 | |
| Columbus, OH 43240 Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | , c uu. y cu c, c cu | or choose an anal apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Ford Fusion ARM#23894 | | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| Jerome Gibson | Case number (if known) | | |
|---|---|---|------------|
| JP Morgan Chase Bank | Last 4 digits of account number | various accts | \$600.0 |
| Nonpriority Creditor's Name POB 659754 | When was the debt incurred? | unknown | |
| San Antonio, TX 78265 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Credit Card | Is | |
| Yes | #xxxx-2300 #xxxx-9071 | | |
| K&D Group | Last 4 digits of account number | 0542 | \$3,907.00 |
| Nonpriority Creditor's Name | | | . , |
| POB 219 Willoughby, OH 44096 | When was the debt incurred? | unknown | |
| Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | West Asset Management Other. Specify Acct#26330434, Ref#260350912 | | |
| KamCo Financial Corp. | Last 4 digits of account number | 1961 | \$575.80 |
| Nonpriority Creditor's Name 25480 Aurora Rd. Bedford Hts, OH 44146 | When was the debt incurred? | 10/30/2011 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Payday loa | _ | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| 1 Jerome Gibson | Case number (if known) | | |
|---|---|--|----------|
| Lapasta Tribal Lending Enterprise Nonpriority Creditor's Name | Last 4 digits of account number | unknow | \$305.00 |
| POB 1120 Boulevard, CA 91905 | When was the debt incurred? | July/Aug 2011 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Internet page | yday loan | |
| McKenzie Small Loans of Ohio, Inc. | Last 4 digits of account number | 6846 | \$501.0 |
| Nonpriority Creditor's Name dba National Cash Advance 21638 Llbby Road Unit #432 | When was the debt incurred? | August/Sept 2011 | |
| Maple Heights, OH 44137 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| debt Is the claim subject to offset? | | | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Payday Ioa | <u>n</u> | |
| Money Stop | Last 4 digits of account number | 5292 | \$549.8 |
| Nonpriority Creditor's Name 21700 Miles Rd. Cleveland, OH 44128-5000 | When was the debt incurred? | 11/25/2011 | |
| Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| □Yes | ■ Other. Specify Payday loa | n | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| 1 Jerome Gibson | | | |
|--|--|---|----------|
| North Coast | Last 4 digits of account number | 4003 | \$0. |
| Nonpriority Creditor's Name | | | |
| 20525 Center Drive Cleveland, OH 44116 | When was the debt incurred? | Opened 11/05/10 Last Active 4/08/11 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | Other. Specify Unsecured | | |
| North Coast | Last 4 digits of account number | 4002 | \$0. |
| Nonpriority Creditor's Name | | | |
| 20525 Center Drive Cleveland, OH 44116 | When was the debt incurred? | Opened 3/04/10 Last Active 7/06/10 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Unsecured | | |
| North Coast | Last 4 digits of account number | 4001 | \$0. |
| Nonpriority Creditor's Name | _ | | <u> </u> |
| 20525 Center Drive Cleveland, OH 44116 | When was the debt incurred? | Opened 8/10/09 Last Active 1/25/10 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharin | | |
| Yes | Other. Specify Unsecured | | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| Ohio Department Of Taxation | Last 4 digits of account number | 2940 | Unknowr |
|---|---|--|------------|
| Nonpriority Creditor's Name Attn: Bankruptcy Division PO Box 530 Columbus, OH 43216 | When was the debt incurred? | 2002-2019 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharin | | |
| Yes | Other. Specify Ohio perso | nal income tax | |
| Ohio Neighborhood Finance, Inc, | Last 4 digits of account number | Unknown | Unknown |
| Nonpriority Creditor's Name 5750 Chevrolet Blvd. Parma, OH 44130 | When was the debt incurred? | 2011 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| debt Is the claim subject to offset? | □ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Payday loa | <u>n</u> | |
| Ohio's First Class Credit Union Nonpriority Creditor's Name | Last 4 digits of account number | 7718 | \$1,000.00 |
| PO Box 5877 Cleveland, OH 44101-0877 | When was the debt incurred? | 11/03/2011 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| Yes | Other. Specify Birthday Io | an | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| 1 Jerome Gibson | | Case number (if known) | |
|--|--|---|---------|
| Ohio's First Class Credit Union | Last 4 digits of account number | 1223 | \$979.0 |
| Nonpriority Creditor's Name PO Box 5877 Cleveland, OH 44101-0877 | When was the debt incurred? | 2010 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Credit Card | 1 | |
| Ohio's First Class Credit Union | Last 4 digits of account number | 3512 | \$0.0 |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5877 | When was the debt incurred? | Opened 11/08/10 Last Active 9/01/11 | |
| Cleveland, OH 44101 | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | Continuent | | |
| Debtor 2 only | ☐ Contingent ☐ Unliquidated | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | _ ' | | |
| ☐ At least one of the debtors and another | • | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | , | |
| ■ No | Debts to pension or profit-sharing | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Unsecured | Other. Specify Unsecured | |
| Ohio's First Class Credit Union | Last 4 digits of account number | 3512 | \$0.0 |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5877 | When was the debt incurred? | Opened 6/24/10 Last Active 6/23/11 | |
| Cleveland, OH 44101 Number Street City State Zip Code | As of the date you file, the claim | ic. Chack all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim | is. Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | ☐ Debts to pension or profit-sharir | | |
| Yes | Other. Specify Unsecured | | |

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| Ohio's First Class Credit Union Nonpriority Creditor's Name | Last 4 digits of account number | <u>3512</u> | \$0. | |
|---|--|---|----------|--|
| Attn: Bankruptcy Po Box 5877 | cruptcy Opened 6/24/09 Last Active | | | |
| Cleveland, OH 44101 | _ | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| Yes | Other. Specify Unsecured | | | |
| PNC Bank | Last 4 digits of account number | 2035 | \$800 | |
| Nonpriority Creditor's Name | _ | | <u> </u> | |
| PO Box 609 | When was the debt incurred? | 2011 | | |
| Pittsburgh, PA 15238-9738 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | |
| Who incurred the debt? Check one. | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| Check if this claim is for a community | Student loans | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | |
| ■ No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | | |
| Yes | Other. Specify Overdraft | | | |
| Receivables Performance Mgmt | | 2520 | \$1,795. | |
| Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ1,733 | |
| Attn: Bankruptcy Po Box 1548 | When was the debt incurred? | Opened 10/17 | | |
| Lynnwood, WA 98036 Number Street City State Zip Code | As of the date you file, the claim | is. Chack all that apply | | |
| Who incurred the debt? Check one. | As of the date you me, the claim | в. Спеск ан так арру | | |
| ■ Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | | |
| Is the claim subject to offset? | report as priority claims | • | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| □Yes | Other. Specify Collection | Attornev T-Mobile Usa | | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| Debtor 1 Jerome Gibson | | | | | | | | |
|------------------------|---|---|---|------------|--|--|--|--|
| 4.5 | Sprint | Look A digito of account number | 4541 | \$1,420.21 | | | | |
| 0 | Nonpriority Creditor's Name PO Box 1259 Dept 98696 | Last 4 digits of account number When was the debt incurred? | | Ψ1,720.21 | | | | |
| | Oaks, PA 19456 | | | | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | Debtor 1 only | Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | Yes | ■ Other. Specify Cellphone : Ref No. 155 | | | | | | |
| 4.5 1 | Sterling Jewelers, Inc. | Last 4 digits of account number | 0339 | \$0.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy | | Opened 8/08/14 Last Active | | | | | |
| | Po Box 1799 | When was the debt incurred? | 2/03/16 | | | | | |
| | Akron, OH 44309 | | | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | | | | | | | |
| | Debtor 1 only | | | | | | | |
| | Debtor 2 only | ☐ Debtor 2 only ☐ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Charge Acc | count | | | | | |
| 4.5 2 | Synchrony Bank/Walmart | Last 4 digits of account number | 5732 | \$678.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 | When was the debt incurred? | Opened 12/23/13 Last Active 2/10/19 | | | | | |
| | Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | _ | □ Debtor 2 only □ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | | | |
| | ☐ At least one of the debtors and another | | | | | | | |
| | _ | ☐ Student loans | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | ☐ Yes | Other Specify Credit Card | | | | | | |
| | — 163 | Other. Specify | • | | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

| 1 Jerome Gibson | | | |
|--|---|--|------------|
| T-Mobile | Last 4 digits of account number | 3351 | \$1,063.08 |
| Nonpriority Creditor's Name %Diversified Consultants, Inc. POB 551268 | When was the debt incurred? | unknown | |
| Jacksonville, FL 32256 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| _ | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| □ Yes | ■ Other. Specify Phone serv DC# 967766 | ice | |
| UH Case Medical Center | Last 4 digits of account number | 6164 | \$75.00 |
| Nonpriority Creditor's Name POB 90144 | When was the debt incurred? | unknown | · |
| Cleveland, OH 44190 Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim i | 3. Oncor all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Medical ser | vice | |
| | | various | |
| UHHS Bedford Medical Center | Last 4 digits of account number | accts | \$284.00 |
| Nonpriority Creditor's Name PO Box 74629 Cleveland, OH 44190 | When was the debt incurred? | unknown | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| No | ☐ Debts to pension or profit-sharin | | |
| ☐ Yes | Medical ser 3665702-1 / ■ Other. Specify 00837475-1 | | |
| | 00037473-1 | 1 10007TU-ΨΔU | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| Debt | or 1 Jerome Gibson | | Case number (if known) | | | | | | |
|--------------|---|--|---|-------------------------|--|--|--|--|--|
| 4.5 6 | Visa Ofccu Nonpriority Creditor's Name | Last 4 digits of account number | 7925 | \$0.00 | | | | | |
| | P.o. Box 5877 Cleveland, OH 44101 | When was the debt incurred? | Opened 5/25/10 Last Active 9/30/11 | | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecur | ed claim: | | | | | | |
| | | ☐ Student loans | | | | | | | |
| | ☐ Check if this claim is for a community debt | | paration agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | salation agreement of allocod that you are not | | | | | | |
| | ■ No | Debts to pension or profit-shar | ing plans, and other similar debts | | | | | | |
| | ☐ Yes | Other. Specify Credit Car | rd | | | | | | |
| 4.5 | Woodforest National Bank | Last 4 digits of account number | . 1699 | \$500.00 | | | | | |
| 7 | Nonpriority Creditor's Name PO Box 7889 | When was the debt incurred? | 2015 | | | | | | |
| | The Woodlands, TX 77387-7889 | | in Obselve Habert and by | | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | т іs: Спеск ан that арріу | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | ☐ Debtor 2 only | | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | | | | |
| | \square At least one of the debtors and another | ed claim: | | | | | | | |
| | \square Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | ■ No | | | | | | | | |
| | Yes | Other. Specify Overdraft | | | | | | | |
| Part | 3: List Others to Be Notified About a D | ebt That You Already Listed | | | | | | | |
| is tı hav | this page only if you have others to be notified rying to collect from you for a debt you owe to be more than one creditor for any of the debts the ified for any debts in Parts 1 or 2, do not fill out | someone else, list the original creditor nat you listed in Parts 1 or 2, list the add | in Parts 1 or 2, then list the collection agency I | here. Similarly, if you | | | | | |
| | and Address | On which entry in Part 1 or Part 2 did yo | | | | | | | |
| | ounts Receivable Mgmt., Inc. . Box 129 | | Part 1: Creditors with Priority Unsecured Claim | | | | | | |
| | rofare, NJ 08086-0129 | Last 4 digits of account number | Part 2: Creditors with Nonpriority Unsecured C | laims | | | | | |
| Nome | e and Address | On which entry in Port 1 or Port 2 did yo | us liet the original graditor? | | | | | | |
| | Cash Express, Inc. | On which entry in Part 1 or Part 2 did you Line 4.1 of (Check one): | \square Part 1: Creditors with Priority Unsecured Claim | S | | | | | |
| 1231 | I Greenway Drive, Ste 700 | | Part 2: Creditors with Nonpriority Unsecured C | | | | | | |
| Irvin | ng, TX 75038 | Last 4 digits of account number | , | | | | | | |
| | e and Address | On which entry in Part 1 or Part 2 did yo | ou list the original creditor? | | | | | | |
| | ericredit Financial Services | | ☐ Part 1: Creditors with Priority Unsecured Claim | | | | | | |
| | Box 182673 ngton, TX 76096 | l | Part 2: Creditors with Nonpriority Unsecured C | laims | | | | | |
| AI III | 19.0.1, 17. 10000 | Last 4 digits of account number | | | | | | | |
| Name | e and Address | On which entry in Part 1 or Part 2 did yo | au list the original creditor? | | | | | | |
| | et Alliance | | \square Part 1: Creditors with Priority Unsecured Claim | S | | | | | |
| | Georgetown, Ste 104 | | Part 2: Creditors with Nonpriority Unsecured C | | | | | | |
| Woo | od Dale, IL 60191 | | • | | | | | | |

Official Form 106 E/F Schedule
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Schedule E/F: Creditors Who Have Unsecured Claims

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| Debtor 1 Jerome Gibson | | Case number (if known) | |
|---|--|--|--|
| | Last 4 digits of account number | | |
| Name and Address AT&T PO Box 8100 Aurora, IL 60507-8100 | On which entry in Part 1 or Part 2 of Line 4.5 of (Check one): | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | |
| , | Last 4 digits of account number | | |
| Name and Address Cashland 17 Triangle Park Cincinnati, OH 45246 | On which entry in Part 1 or Part 2 of Line 4.9 of (Check one): | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | |
| | Last 4 digits of account number | | |
| Name and Address Chase Bank P.O. Box 52188 Phoenix, AZ 85072-2188 | On which entry in Part 1 or Part 2 of Line 4.10 of (Check one): | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | |
| | Last 4 digits of account number | | |
| Name and Address City of East Cleveland Finance Department 14340 Euclid Ave. Cleveland, OH 44112 | On which entry in Part 1 or Part 2 of Line 4.16 of (Check one): | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | |
| | Last 4 digits of account number | | |
| Name and Address Diversified Consultants, Inc. PO Box 551268 Jacksonville, FL 32256-1268 | On which entry in Part 1 or Part 2 of Line 4.6 of (Check one): | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | |
| Jacksonvine, 1 L 32230-1200 | Last 4 digits of account number | 6238 | |
| Name and Address ERC PO Box 23870 Jacksonville, FL 32241 | On which entry in Part 1 or Part 2 of Line 4.50 of (Check one): Last 4 digits of account number | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | |
| Name and Address Fifth Third Bank Madisonville Operations Center MD 1MOC2G Cincinnati, OH 45263 | On which entry in Part 1 or Part 2 of Line 4.23 of (Check one): Last 4 digits of account number | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | |
| N | | | |
| Name and Address GM Financial PO box 183123 Arlington, TX 76096-3123 | On which entry in Part 1 or Part 2 of Line 4.4 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims | |
| 3 , | Last 4 digits of account number | | |
| Name and Address Jefferson Capital Systems LLC 16 McLeland Road | On which entry in Part 1 or Part 2 or Line 4.26 of (Check one): | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | |
| Saint Cloud, MN 56303 | Last 4 digits of account number | 9102 | |
| Name and Address Kamco Financial James K. Roosa Company | On which entry in Part 1 or Part 2 of Line 4.34 of (Check one): | did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims | |
| POB 609125 Cleveland, OH 44109 | Last 4 digits of account number | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Name and Address | On which entry in Part 1 or Part 2 or | did you list the original creditor? | |
| National Cash Advance 21638 Libby Rd., Unit #432 Maple Heights, OH 44137 | Line 4.36 of (Check one): | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | |
| | Last 4 digits of account number | | |

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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| Debtor 1 Jerome Gibson | Case number (if known) | |
|---|---|--|
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | |
| Ohio Attorney General Attn: Trish Lazich | Line 4.41 of (Check one): | |
| 615 West Superior Ave., 11th Floor | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Cleveland, OH 44113 | Last 4 digits of account number | |
| | | |
| Name and Address Ohio Attorney General | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.41 of (Check one): | |
| 150 E. Gay St. 21st Floor | Part 2: Creditors with Nonpriority Unsecured Claims | |
| Columbus, OH 43215 | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | |
| Ohio Neighborhood Finance, Inc. | Line 4.9 of (Check one): | |
| dba Cashland 17 Triangle Park Drive | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Cincinnati, OH 45246 | | |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | |
| Powers, Friedman & Linn 23240 Chagrin Blvd, Suite 180 | Line 4.33 of (Check one): | |
| Shaker Heights, OH 44122 | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | |
| Revenue Group 3700 Park East Dr., Ste 240 | Line 4.55 of (Check one): | |
| Beachwood, OH 44122 | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| · | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | |
| Southwest Credit Systems, L.P. 4120 International Pkwy, Ste 1100 | Line 4.5 of (Check one): | |
| Carrollton, TX 75007-1958 | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| | Last 4 digits of account number 1549 | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | |
| U.S. Department of Justice Tax Division | Line 4.30 of (Check one): | |
| PO Box 55 - Ben Franklin Station | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Washington, DC 20044 | | |
| | Last 4 digits of account number | |
| Name and Address United States Attorney | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.30 of (Check one): | |
| Carl B. Stokes U.S. Courthouse | Line 4.30 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims | |
| 801 Superior Ave., Ste 400 | - Fatt 2. Greditors with Northholity Orisective Glains | |
| Cleveland, OH 44113 | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | |
| West Asset Management, Inc. | Line 4.33 of (Check one): | |
| POB 790113 Saint Louis, MO 63179 | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Saint Louis, NO 03173 | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | |
| Woodforest National Bank | Line 4.57 of (Check one): | |
| Attn: Loan Dept. PO Box 7889 | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Spring, TX 77387-7889 | | |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | |
| Woodforest Natural Bank PO Box 7889 | Line <u>4.57</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | |
| Woodlands, TX 77387 | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |

Schedule E/F: Creditors Who Have Unsecured Claims

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Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 106,978.18 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 106,978.18 |

| Fill in this infor | mation to identify your | case: | | |
|---|-------------------------|-------------------|-----------|------------------------------------|
| Debtor 1 | Jerome Gibson | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF OHIO | |
| Case number | | | | |
| (if known) | | | | Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number | whom you have the r, Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | July | | Oldio | 211 0000 | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

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| Fill in this in | nformation to identify your | case: | | | |
|--|--|---|--|--|--------------------------------------|
| Debtor 1 | Jerome Gibson | | | | |
| - | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) |) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | | |
| Case numbe | er | | | | ☐ Check if this is an amended filing |
| | Form 106H µle H: Your Cod | ebtors | | | 12/15 |
| people are fi fill it out, and your name a | iling together, both are equ | ally responsible for supp boxes on the left. Attack Answer every question | olying correct informat n the Additional Page t | is complete and accurate as pation. If more space is needed, to this page. On the top of any eas a codebtor. | copy the Additional Page, |
| □ No ■ Yes | | | | | |
| | n the last 8 years, have you, California, Idaho, Louisiana | | | ry? (Community property states ington, and Wisconsin.) | and territories include |
| _ | Go to line 3. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| in line 2 | 2 again as a codebtor only i 06D), Schedule E/F (Official | f that person is a guaran | tor or cosigner. Make | r if your spouse is filing with sure you have listed the cred 16G). Use Schedule D, Sched | itor on Schedule D (Official |
| | olumn 1: Your codebtor Ime, Number, Street, City, State and Z | IP Code | | Column 2: The creditor to Check all schedules that a | o whom you owe the debt apply: |
| | rigette Johnson nknown | | | ☐ Schedule D, line ■ Schedule E/F, line _ ☐ Schedule G Goldberg Companies, | |

Schedule H: Your Codebtors

| Fill | in this information to identify your | case: | | | | | | | | | |
|--------------------|---|---|--|----------------------|-------------------------|--|-------------------------------|----------------------------|-----------------|--|--|
| Del | btor 1 Jerome Gib | oson | | | | | | | | | |
| 1 - | btor 2 buse, if filing) | | | | _ | | | | | | |
| Uni | ited States Bankruptcy Court for the | e: NORTHERN DISTRIC | CT OF OHIO | | _ | | | | | | |
| | se number nown) | | - | | | Check if this is: An amended A supplement | ed filing ent showing | | | | |
| \bigcirc | fficial Form 106I | | | | | | | lowing date: | | | |
| | chedule I: Your Inc | ome | | | | MM / DD/ Y | YYY | | 12/15 | | |
| sup spo atta | as complete and accurate as posplying correct information. If you use. If you are separated and yo ch a separate sheet to this form. Describe Employment | are married and not fili ur spouse is not filing w On the top of any additi | ng jointly, and your s ith you, do not includ | spouse i de infor | is living v mation a | with you, included in the bout your spo | ude inform ouse. If mo | ation about re space is | your needed, | | |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | Debtor 2 or non-filing spouse | | | | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed | | ☐ Employed | | | | | | |
| | | Employment status | ☐ Not employed | | | ☐ Not employed | | | | | |
| | employers. | Occupation | Food Preparatio | | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Cleveland Metro District | politar | Schoo | I | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 1111 Superior A Cleveland, OH 4 | | | | | | | | |
| | | How long employed t | here? 3 years | | | | | | | | |
| Par | rt 2: Give Details About Mo | onthly Income | | | | | | | | | |
| spou | mate monthly income as of the cuse unless you are separated. ou or your non-filing spouse have me space, attach a separate sheet to | nore than one employer, co | , | | | | · | • | J | | |
| | | | | | For | Debtor 1 | For Deb | tor 2 or g spouse | | | |
| 2. | List monthly gross wages, saldeductions). If not paid monthly, | | | 2. | \$ | 1,028.34 | \$ | N/A | | | |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | 0.00 | +\$ | N/A | | | |
| 4. | Calculate gross Income. Add I | ine 2 + line 3. | | 4. | \$ | 1,028.34 | \$ | N/A | | | |
| | | | | | | | | | | | |

| | | | | ı | For Debtor 1 | | | r Debtor n-filing s | | |
|-----|-----------------|---|-----------------|----------|---------------|-------|-------|------------------------|--------------|--------------|
| | Copy | y line 4 here | 4. | _ | \$ 1,028 | 3.34 | \$ | ii-iiiiig s | pouse N/A | _ |
| 5. | List | all payroll deductions: | | | | | _ | | | <u>-</u> |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | 9 | \$ 40 | 0.73 | \$ | | N/A | \ |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | | 2.84 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | <u> </u> | 0.00 | \$ | | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | , | \$ | 0.00 | \$ | | N/A | \ |
| | 5e. | Insurance | 5e. | , | \$ 161 | 1.50 | \$ | | N/A | <u>\</u> |
| | 5f. | Domestic support obligations | 5f. | , | \$ (| 0.00 | \$ | | N/A | <u>\</u> |
| | 5g. | Union dues | 5g. | , | | 7.62 | \$_ | | N/A | |
| | 5h. | Other deductions. Specify: | 5h | + 3 | \$ | 0.00 | + \$_ | | N/A | <u>\</u> |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 322 | 2.69 | \$_ | | N/A | <u>\</u> |
| 7. | Calc | sulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | § 70 5 | 5.65 | \$_ | | N/A | <u>\</u> |
| 8. | 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | ; | \$ | 0.00 | \$ | | N/A | . |
| | 8b. | Interest and dividends | 8b. | , | \$ | 0.00 | \$ | | N/A | <u> </u> |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | t 8c. | , | \$ (| 0.00 | \$ | | N/A | 1 |
| | 8d. | Unemployment compensation | 8d. | , | \$ (| 0.00 | \$_ | | N/A | <u>\</u> |
| | 8e. | Social Security | 8e. | ; | \$(| 0.00 | \$_ | | N/A | 1 |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | ç | \$ | 0.00 | \$ | | N/A | \ |
| | 8g. | Pension or retirement income | 8g. | , | \$ (| 0.00 | \$_ | | N/A | <u>\</u> |
| | 8h. | Love offering for preaching at 3 Other monthly income. Specify: churches | 8h | + : | \$ 358 | 3.33 | + \$ | | N/A | \ |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | — 9. | \$ | 358 | 3.33 | \$ | | N/ | |
| | | • | | | - | | | | | |
| 10. | | tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | <u> </u> | 1,063.98 | + \$_ | | N/A | = \$ | 1,063.98 |
| 11. | Inclu- other | e all other regular contributions to the expenses that you list in <i>Scheduli</i> de contributions from an unmarried partner, members of your household, you r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | r deper | | | | | | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The reset hat amount on the Summary of Schedules and Statistical Summary of Certains | | | | | | e. 12. | \$ | 1,063.98 |
| | | | | | | | | ι | Comb | |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form | 1? | | | | | | month | ly income |
| | | No. | | | | | | | | |
| | | Yes. Explain: Debtor's wages from Cleveland Metro School Di | | | | | | | | vary |

Official Form 106I Schedule I: Your Income page 2

means test average for the period October 1, 2018 through March 2019.

month by month. Both wages and love offering income disclosed here calculated as the 6 month

| Fill in | n this informat | tion to identify yo | our case: | | | | | | | | | | |
|-----------------|---|---|-------------------------|--|--|---------------------|-----------------|-----------|-------------------------------|-------|--|--|--|
| Debto | or 1 | Jerome Gibs | son | | | Ch | eck if this is: | | | | | | |
| | | | | | | ☐ An amended filing | | | | | | | |
| Debto | | | | | | | | | ing postpetition chap | ter | | | |
| (Spou | use, if filing) | | | | | | 13 expense | s as of t | he following date: | | | | |
| Unite | d States Bankr | uptcy Court for the | : NORTH | IERN DISTRICT OF OHIO | | | MM / DD / Y | /YYY | | | | | |
| Case (If kno | number own) | | | | | | | | | | | | |
| Off | ficial Fo | rm 106J | | | | | | | | | | | |
| | | | Evnor | | | | | | | 40/45 | | | |
| | | J: Your | | | - C'l' (()- | - 41 | | -11-1- 6- | | 12/15 | | | |
| infor | rmation. If m | | eded, atta | If two married people and chanother sheet to this formal. | | | | | | | | | |
| Part | 1: Descr | ibe Your House | hold | | | | | | | | | | |
| | Is this a join | | | | | | | | | | | | |
| | ■ No. Go to | | in a sonar | ate household? | | | | | | | | | |
| | _ | | iii a sepai | ate nousenoid: | | | | | | | | | |
| | □ No | | st file Offici | al Form 106J-2, <i>Expenses</i> | for Separate House | hold of De | ebtor 2. | | | | | | |
| 2. | Do you have | e dependents? | ■ No | | | | | | | | | | |
| | Do not list De Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Depende age | ent's | Does dependent live with you? | | | | |
| | Do not state | the | | | | | | | □ No | | | | |
| | dependents | names. | | | | | | | ☐ Yes | | | | |
| | | | | | | | | | □ No | | | | |
| | | | | | | | | | ☐ Yes | | | | |
| | | | | | | | | | □ No | | | | |
| | | | | | | | | | ☐ Yes | | | | |
| | | | | | | | | | ☐ No | | | | |
| | | | | | | | | | ☐ Yes | | | | |
| | expenses of | enses include f people other t d your depende | han $_{m \Box}$ | No Yes | | | | | | | | | |
| expe appl | mate your ex enses as of a icable date. | date after the l | our bankru bankruptc | uptcy filing date unless y y is filed. If this is a supp | lemental Schedule | | | | | | | | |
| the v | | n assistance an | | government assistance it luded it on <i>Schedule I:</i> Y | | | Yo | our expe | enses | | | | |
| 4. | | r home owners | | ses for your residence. In r lot. | nclude first mortgage | e 4. | \$ | | 400.00 | | | | |
| | If not includ | ed in line 4: | | | | | | | | | | | |
| | 4a. Real e | state taxes | | | | 4a. | \$ | | 0.00 | | | | |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. | · | | 0.00 | | | | |
| | | - | | ıpkeep expenses | | 4c. | \$ | | 0.00 | | | | |
| | 4d. Home | owner's associat | ion or cond | dominium dues | | 4d. | \$ | | 0.00 | | | | |
| 5 | Additional n | nortango navm | anto for wo | ur residence, queb ac bar | ma aguitu laana | 5 | Φ | | 0.00 | | | | |

| Fill in thi | s information to identify your | case: | | | |
|----------------|---|--------------------------|------------------------------|---|-----------------|
| Debtor 1 | Jerome Gibson | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fi | iling) First Name | Middle Name | Last Name | | |
| United St | ates Bankruptcy Court for the: | NORTHERN DISTRIC | T OF OHIO | | |
| Case nun | nher | | | | |
| (if known) | | | | ☐ Chec | k if this is an |
| | | | | amer | nded filing |
| Official | Form 106Dec | | | | |
| Decla | aration About a | n Individua | Debtor's Scl | nedules | 12/15 |
| | both. 18 U.S.C. §§ 152, 1341, 1 Sign Below | | , , | fines up to \$250,000, or imprisonn | |
| Did | you pay or agree to pay some | one who is NOT an atto | rney to help you fill out ba | nkruptcy forms? | |
| | No | | | | |
| | Yes. Name of person | | | Attach Bankruptcy Petition F Declaration, and Signature (| |
| | er penalty of perjury, I declare they are true and correct. | that I have read the sur | nmary and schedules filed | with this declaration and | |
| x / | /s/ Jerome Gibson | | X | | |
| | Jerome Gibson | | Signature of D | Debtor 2 | |
| | Signature of Debtor 1 | | - 3 | | |
| | Data Amell 0 0040 | | Data | | |
| L | Date April 9, 2019 | | Date | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

| Fill in t | his inform | ation to identify you | r case: | | | |
|-----------------------|---------------------|--|---|---|--|---|
| Debtor | | Jerome Gibson | | | | |
| Debioi | • | First Name | Middle Name | Last Name | | |
| Debtor 2 | | First Name | Middle Name | Last Name | | |
| ` ' | | | | | | |
| United S | States Ban | kruptcy Court for the: | NORTHERN DISTRICT (| DF OHIO | | |
| Case nu (if known) | | | | | | theck if this is an mended filing |
| State Be as co | ement | nd accurate as poss | | are filing together, both are | eankruptcy equally responsible for sup | |
| number | (if known |). Answer every que | stion. | • | , | |
| Part 1: | | current marital statu | arital Status and Where You us? | i Livea Before | | |
| ■ | Married Not marr | ried | | | | |
| 2. Dui | ring the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | No Yes. List | all of the places you | lived in the last 3 years. Do no | ot include where you live nov | ı. | |
| De | ebtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | Idress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territory ico, Texas, Washington and W | |
| | No Yes. Mal | ke sure you fill out <i>Sc</i> i | hedule H: Your Codebtors (O | fficial Form 106H). | | |
| Part 2 | Explair | n the Sources of You | ır Income | | | |
| Fill | in the total | I amount of income yo | nployment or from operating the received from all jobs and a have income that you receive | all businesses, including part | | ndar years? |
| | No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until I for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$3,093.63 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Best Case Bankruptcy

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Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments

include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Go to line 7.

No.

Case number (if known

Official Form 107

Debtor 1

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

19-12088-aih Doc 1 FILED 04/09/19 ENTERED 04/09/19 12:30:19

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Best Case Bankruptcy

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| | transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alreated No Yes. Fill in the details. | nade a | is security (such as | the granting of a | a sec | urity inte | erest or mortgage on yo | ur pro | operty). Do not |
|-----|---|---------|--|--------------------------|----------------|-----------------------|---|--------|---|
| | Person Who Received Transfer Address Person's relationship to you | | Description and value of property transferred | | paymen | | cribe any property or ments received or debts I in exchange | | Date transfer was nade |
| 19. | Within 10 years before you filed for bankru beneficiary? (These are often called asset-p No | | | d trust or similar devic | e of v | which you are a | | | |
| | Yes. Fill in the details. Name of trust | | Description and value of the property transferred | | | | ferred | | Date Transfer was |
| Par | t 8: List of Certain Financial Accounts, I | nstrun | nents Safe Denos | it Boxes, and St | torac | ıe Unit | s | | iiduo |
| 20. | Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, assolution in the details. | cy, we | ere any financial acou | ccounts or instr | rume s of (| nts hel | ld in your name, or for | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | | et 4 digits of count number | Type of acco instrument | nt close move | | Date account was closed, sold, moved, or transferred | | Last balance before closing or transfer |
| | Do you now have, or did you have within 1 cash, or other valuables? | year | before you filed fo | r bankruptcy, a | ny s | afe dep | oosit box or other depo | sitor | ry for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | | De | Describe the contents | | | Do you still have it? |
| 22. | Have you stored property in a storage unit ■ No | or pla | ace other than you | r home within 1 | l yea | r befor | e you filed for bankrup | otcy? | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | | Who else has or to it? Address (Number, State and ZIP Code) | | De | scribe 1 | the contents | | Do you still have it? |
| Par | 19: Identify Property You Hold or Contro | l for S | Someone Else | | | | | | |
| 23. | Do you hold or control any property that s for someone. No Yes. Fill in the details. | omeoi | ne else owns? Inc | lude any proper | rty yo | ou borr | owed from, are storinç | ງ for, | or hold in trust |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | | Where is the pro (Number, Street, City, | | | escribe the property | | | Value |
| Par | t 10: Give Details About Environmental In | forma | Code) | | | | | | |
| For | the purpose of Part 10, the following definit | tions a | apply: | | | | | | |

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Best Case Bankruptcy

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Debtor 1 Jerome Gibson Case number (if known)

regulations controlling the cleanup of these substances, wastes, or material.

| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | | | |
|-----|--|--|--|--|--|-------------------|--|--|
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | | |
| Rep | ort a | Ill notices, releases, and proceedings th | at you know about, regardless of wher | n the | ey occurred. | | | |
| 24. | 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State and know it | | | | |
| 25. | Hav | re you notified any governmental unit of | any release of hazardous material? | | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) know it | | | | | | | |
| 26. | Hav | e you been a party in any judicial or adr | ninistrative proceeding under any envi | ron | mental law? Include settlements | and orders. | | |
| | | No | | | | | | |
| | Ca | Yes. Fill in the details. se Title | Court or agency | Na | iture of the case | Status of the | | |
| | | se Number | Name Address (Number, Street, City, State and ZIP Code) | 140 | nuite of the case | case | | |
| Par | t 11: | Give Details About Your Business or | Connections to Any Business | | | | | |
| 27. | Wit | hin 4 years before you filed for bankrupt | tcy, did you own a business or have an | ıy of | f the following connections to any | / business? | | |
| | | ☐ A sole proprietor or self-employed i | n a trade, profession, or other activity, | eith | ner full-time or part-time | | | |
| | | ☐ A member of a limited liability comp | pany (LLC) or limited liability partnersh | ip (l | LLP) | | | |
| | | ☐ A partner in a partnership | | | | | | |
| | | ☐ An officer, director, or managing ex | ecutive of a corporation | | | | | |
| | | ☐ An owner of at least 5% of the votin | g or equity securities of a corporation | | | | | |
| | | No. None of the above applies. Go to I | Part 12. | | | | | |
| | | Yes. Check all that apply above and fill | I in the details below for each business | S. | | | | |
| | | siness Name | Describe the nature of the business | | Employer Identification numbe | | | |
| | | dress mber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | Do not include Social Security number or ITIN. Dates business existed | | | |
| 28. | | hin 2 years before you filed for bankrupt citutions, creditors, or other parties. | tcy, did you give a financial statement t | to a | nyone about your business? Incl | ude all financial | | |
| | | No Yes. Fill in the details below. | | | | | | |
| | | me dress mber, Street, City, State and ZIP Code) | Date Issued | | | | | |
| Par | t 12: | Sian Below | | | | | | |

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Official Form 107

Best Case Bankruptcy

page 6

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Debtor 1 Jerome Gibson | Case number (if known) | |
|--|---|------|
| with a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519, an | ult in fines up to \$250,000, or imprisonment for up to 20 years, or both. d 3571. | |
| /s/ Jerome Gibson | | |
| Jerome Gibson Signature of Debtor 1 | Signature of Debtor 2 | |
| Date April 9, 2019 | Date | |
| Did you attach additional pages ■ No □ Yes | s to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 1 | 07)? |
| Did you pay or agree to pay sor ■ No | meone who is not an attorney to help you fill out bankruptcy forms? | |
| ☐ Yes. Name of Person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

| Fill in this info | rmation to identify your | case: | | |
|---------------------------|--|--|------------------------------------|---|
| Debtor 1 | Jerome Gibson | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | | n for Individu | uals Filing Under | Chapter 7 12/15 |
| | dividual filing under cha ve claims secured by yo | pter 7, you must fill out t ur property, or | his form if: | |
| you have lea | sed personal property a | and the lease has not exp | oired. | |
| | ever is earlier, unless th | | | y the date set for the meeting of creditors, copies to the creditors and lessors you list |
| | eople are filing togethe | r in a joint case, both are | equally responsible for supplyi | ng correct information. Both debtors must |
| Be as complete | and accurate as possib | le. If more space is need | led, attach a separate sheet to th | nis form. On the top of any additional pages. |

Part 1: List Your Creditors Who Have Secured Claims

write your name and case number (if known).

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's Eagle Loan | ■ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of 2011 Cadillac SRX 148,000 | ☐ Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property miles securing debt: VIN#:3GYFNAEY8BS600237 | ☐ Retain the property and [explain]: | |
| Creditor's Integrity Funding Ohio LLC | ■ Surrender the property. | ■ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of 1999 Jaguar 4S 130,000 miles | ☐ Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property VIN#:SAJKX604XXC856202 securing debt: Does not run. Scrap value only | ☐ Retain the property and [explain]: | |

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

| Debtor 1 Jerome Gibson | Case number (if known) |
|--|--|
| Lessor's name: Description of leased Property: | □ No □ Yes |
| Lessor's name: Description of leased Property: | □ No |
| Lessor's name: Description of leased | ☐ Yes |
| Property: Lessor's name: | ☐ Yes |
| Description of leased Property: | □ No □ Yes |
| Lessor's name: Description of leased Property: | □ No |
| Lessor's name: | ☐ Yes |
| Description of leased Property: | ☐ Yes |
| Lessor's name: Description of leased Property: | □ No □ Yes |
| Part 3: Sign Below | |
| Under penalty of perjury, I declare that I have indicated my intention property that is subject to an unexpired lease. | about any property of my estate that secures a debt and any personal |
| X /s/ Jerome Gibson Jerome Gibson Signature of Debtor 1 | XSignature of Debtor 2 |
| Date | Date |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

| Fill i | n this information to identify your case: | | | | | | irected ir | this form and in | Form |
|--------------------------|--|--|-----------------------|--------------------------------------|-------------------------|-------------------|---------------------------|--|------------------------|
| Deb | tor 1 Jerome Gibson | | | 122 | 2A-1Sup | p: | | | |
| 1 | tor 2 | | | | ■ 1. The | ere is no pres | umption | of abuse | |
| Unit | ed States Bankruptcy Court for the: Northern District | of Ohio | | [| ар | plies will be n | nade und | ine if a presumpt er <i>Chapter 7 M</i> e | |
| | e number | | | | Ca | lculation (Off | icial Forn | n 122A-2). | |
| (if kno | wn) | | | | | | | apply now beca but it could apply | |
| | | | | | ☐ Che | ck if this is a | n amen | ded filing | |
| Off | icial Form 122A - 1 | | | | | | | | |
| Ch | apter 7 Statement of Your Cu | rren | t Mor | nthly Inc | ome | | | | 12/15 |
| attacl case qualif | | which the community and the community and the community and the community are community and the community and the community are co | e addition sumption | nal information a of abuse becaus | pplies. C se you do | n the top of a | ny additio narily cor | nal pages, write y sumer debts or b | our name and ecause of |
| 1. | What is your marital and filing status? Check one o | nly. | | | | | | | |
| | ☐ Not married. Fill out Column A, lines 2-11. | | | | | | | | |
| | ☐ Married and your spouse is filing with you. Fill o | ut both | Columns | A and B, lines | 2-11. | | | | |
| | Married and your spouse is NOT filing with you. | | • | • | | | | | |
| | Living in the same household and are not leg | | | | | | | | |
| | Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evad | legally s | separated | d under nonban | kruptcy I | aw that applic | es or that | | |
| 10 th | II in the average monthly income that you received from al 01(10A). For example, if you are filing on September 15, the 6-re 6 months, add the income for all 6 months and divide the total ousses own the same rental property, put the income from that | month pe al by 6. Fi | riod would | be March 1 throusult. Do not include | igh Augus le any inc | st 31. If the amo | ount of you ore than o | r monthly income v | raried during if both |
| | | | | | Column Debtor | | Colum Debton | | |
| 2. | Your gross wages, salary, tips, bonuses, overtime payroll deductions). | , and co | mmissio | ons (before all | \$ | 1,028.34 | \$ | 0.00 | |
| 3. | Alimony and maintenance payments. Do not include Column B is filled in. | e payme | ents from | a spouse if | \$ | 0.00 | \$ | 0.00 | |
| 4. | All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househol and roommates. Include regular contributions from a s filled in. Do not include payments you listed on line 3. | t. Includ ld, your | le regular depende | contributions nts, parents, | \$ | 0.00 | \$ | 0.00 | |
| 5. | Net income from operating a business, profession | , or farn | n | | | | | | |
| | | | | otor 1 | | | | | |
| | Gross receipts (before all deductions) | \$_ | 0.00 | | | | | | |
| | Ordinary and necessary operating expenses | - \$ _ | 0.00 | | _ | 0.00 | • | 0.00 | |
| | Net monthly income from a business, profession, or fa | rm \$ _ | 0.00 | Copy here -> | \$ | 0.00 | \$ | 0.00 | |
| 6. | Net income from rental and other real property | | | tou 4 | | | | | |
| | | Φ. | | otor 1 | | | | | |
| | Gross receipts (before all deductions) | \$ _ | 0.00 | | | | | | |
| | Ordinary and necessary operating expenses | -\$_ | 0.00 | Comulton | Φ | 0.00 | c | 0.00 | |
| | Net monthly income from rental or other real property | \$ | 0.00 | Copy here -> | ΦΦ | 0.00 | \$ | 0.00 | |

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

0.00

page 1

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7. Interest, dividends, and royalties

0.00

| | | | | | ımn A tor 1 | | Dek | umn B otor 2 ou | | |
|------|---|--|-------------|--------------|----------------|------------|-----------|--------------------|----------|-----------------|
| 8. | Unemployment compensation | | | \$ | | 0.00 | \$ | _ | 0.00 | |
| | Do not enter the amount if you contend that the amoun the Social Security Act. Instead, list it here: | t received was a bene | fit under | | | | | | | |
| | For you \$ For your spouse \$ | 0 | .00 | | | | | | | |
| | | | .00 | | | | | | | |
| | Pension or retirement income. Do not include any an benefit under the Social Security Act. | | | \$ | | 0.00 | \$_ | | 0.00 | |
| 10. | Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below. | Security Act or paymer manity, or internationa a separate page and p | nts I or | \$ | | 0.00 | \$_ \$ | | 0.00 | |
| | Total amounts from separate pages, if any. | | — + | \$ | | 0.00 | \$ \$ | | 0.00 | |
| | , , , | | | | | 1 | | | 0.00 | |
| 11. | Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to | | \$ | 1,028 | 3.34 | + \$ _ | | 0.00 | = \$_ | 1,028.34 |
| | | | | | |] [| | | Total | current monthly |
| Part | 2: Determine Whether the Means Test Applies t | o You | | | | | | | | |
| 12 | Calculate your current monthly income for the year | Follow these stens: | | | | | | | | |
| 12. | 12a. Copy your total current monthly income from line | • | | | Conv | line 11 | horo- | _ | ¢ | 1,028.34 |
| | 12a. Copy your total current monthly income from line | 11 | | | оор, | | 11010- | | φ— | 1,026.34 |
| | Multiply by 12 (the number of months in a year) | | | | | | | | X | 12 |
| | 12b. The result is your annual income for this part of th | e form | | | | | | 12b | . \$ | 12,340.08 |
| | | | | | | | | | | |
| 13. | Calculate the median family income that applies to | you. Follow these ste | ps: | | | | | | | |
| | Fill in the state in which you live. | ОН | | | | | | | | |
| | Fill in the number of people in your household. | 1 | | | | | | | | |
| | Fill in the median family income for your state and size | | | | | | | 13. | \$ | 49,624.00 |
| | To find a list of applicable median income amounts, go for this form. This list may also be available at the bank | | pecified | in the | separa | te instrud | ctions | | | |
| 14. | How do the lines compare? | | | | | | | | | |
| | 14a. Line 12b is less than or equal to line 13. O Go to Part 3. | n the top of page 1, cl | neck box | 1, <i>Th</i> | ere is r | o presun | nption | of abuse | Э. | |
| | 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | of page 1, check box 2 | t, The pre | esump | otion of | abuse is | deterr | mined by | Form 1 | 22A-2. |
| Part | 3: Sign Below | | | | | | | | | |
| | By signing here, I declare under penalty of perjury | that the information of | n this sta | ateme | nt and i | n any att | achme | ents is tr | ue and o | correct. |
| | χ /s/ Jerome Gibson | | | | | | | | | |
| | Jerome Gibson | | | | | | | | | |
| | Signature of Debtor 1 Date April 9, 2019 | | | | | | | | | |
| | MM / DD / YYYY | | | | | | | | | |
| | If you checked line 14a, do NOT fill out or file Form | n 122A-2. | | | | | | | | |
| | If you checked line 14b, fill out Form 122A-2 and f | ile it with this form. | | | | | | | | |

Official Form 122A-1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|---------------|----------------------|--|
| \$24 | 5 filing fee | |
| \$75 | 5 administrative fee | |
| <u>+</u> \$15 | 5 trustee surcharge | |
| \$33 | 5 total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

| | 110 | or mern District or Omo | G V | | |
|---|--|--|---|----------------------------|-------------|
| In re | Jerome Gibson | Debtor(s) | Case No. Chapter | 7 | |
| | | | - | | |
| | DISCLOSURE OF COMPE | NSATION OF ATTOR | NEY FOR DE | EBTOR(S) | |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rende be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | |
| | | | | 0.00 | |
| | Prior to the filing of this statement I have received | | \$ | 0.00 | |
| | Balance Due | | | 0.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed comp | pensation with any other person u | nless they are mem | bers and associates of my | y law firm. |
| | ☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national states. | | | | firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to re | ender legal service for all aspects | of the bankruptcy c | ase, including: | |
| | a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credited d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho | tement of affairs and plan which is ors and confirmation hearing, and reduce to market value; exer ons as needed; preparation a | nay be required; I any adjourned hea mption planning; | rings thereof; | g of |
| 6. | By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis- any other adversary proceeding. | | | es, relief from stay ac | tions or |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of an bankruptcy proceeding. | y agreement or arrangement for p | payment to me for r | epresentation of the debto | or(s) in |
| A | April 9, 2019 | /s/ Michael S. Linn | | | |
| Date | | Michael S. Linn | | | _ |
| | | Signature of Attorney Michael S. Linn, A | | | |
| | | 2012 West 25th St. | | | |
| | | Suite 701 | 40 | | |
| | | Cleveland, OH 441 216-491-5000 Fax | | | |
| | | mslinnlaw@gmail. | | | |
| | | Name of law firm | | | - |
| | | | | | |

United States Bankruptcy Court Northern District of Ohio

| In re | Jerome Gibson | | Case No. | | |
|--------|---------------------------------|---|-------------------|-----------------------|--|
| | | Debtor(s) | Chapter | 7 | |
| | VE | RIFICATION OF CREDITOR N | MATRIX | | |
| The ab | ove-named Debtor hereby verific | es that the attached list of creditors is true and co | rrect to the best | of his/her knowledge. | |
| Date: | April 9, 2019 | /s/ Jerome Gibson | | | |
| | | Jerome Gibson | | | |
| | | Signature of Debtor | | | |

Accounts Receivable Mgmt., Inc. P.O. Box 129
Thorofare, NJ 08086-0129

ACE Cash Express, Inc. 24800 Rockside Rd. Bedford, OH 44146

Ace Cash Express, Inc. 1231 Greenway Drive, Ste 700 Irving, TX 75038

Advance America 9065 Darrow Rd. Twinsburg, OH 44087

Advance National Cash 21638 Libby Rd, Unit#432 Maple Heights, OH 44137

AmeriCredit Internal Collections Dept. POB 183123 Arlington, TX 76096

Americredit Financial Services PO Box 182673 Arlington, TX 76096

Asset Alliance 330 Georgetown, Ste 104 Wood Dale, IL 60191

AT&T POB 5080 Carol Stream, IL 60197

AT&T POB 6416 Carol Stream, IL 60197

AT&T PO Box 8100 Aurora, IL 60507-8100 AT&T-Uverse % Bay Area Credit Service LLC 1901 W. 10th St. Antioch, CA 94509

Brigette Johnson Unknown

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cashland 12548 Rockside Rd. Garfield Heights, OH 44125

Cashland 17 Triangle Park Cincinnati, OH 45246

Chase Bank OH1-1188 340 S. Cleveland Ave., Bldg 370 Westerville, OH 43081

Chase Bank P.O. Box 52188 Phoenix, AZ 85072-2188

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Checksmart 111 5805 Mayfield Rd. Mayfield Heights, OH 44124

Citi/Sears Citibank/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179 Citibank/Best Buy Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179

City of Cleveland Photo Enforcement % Mrs Associates, Inc. 1930 Olney Ave. Cherry Hill, NJ 08003

City of East Cleveland Automated Ticket POB 742503 Cincinnati, OH 45274

City of East Cleveland Finance Department 14340 Euclid Ave. Cleveland, OH 44112

CK Marketing 4342 East 31st Place Yuma, AZ 85365

Credit Acceptance Corp. 25505 W. Twelve Mile Rd. Southfield, MI 48034

Diversified Consultants, Inc. PO Box 551268 Jacksonville, FL 32256-1268

Eagle Loan 5961 Andrews Road Mentor on the Lake, OH 44060

Eastside Lender 2711 Centerville Rd., Ste 120-5900 Wilmington, DE 19808

ERC
PO Box 23870
Jacksonville, FL 32241

ERC/Enhanced Recovery Corp Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256

Everest Cash Advance 300 Creek View Rd. Newark, DE 19711

Fifth Third Bank Madisonville Operations Center MD 1MOC2G Cincinnati, OH 45263

Fifth Third Bank NE Ohio % Complete Payment Recovery Services, Inc. 3500 5th St. Northport, AL 35476

First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

First Premier Bank PO Box 5514 3820 N. Louise Ave. Sioux Falls, SD 57117-5500

GM Financial PO box 183123 Arlington, TX 76096-3123

Goldberg Companies, Inc. 25101 Chagrin Blvd. #300 PO Box 22220 Beachwood, OH 44122

Homecare Collection Service POB 2484 Akron, OH 44309

I C System Inc Attn: Bankruptcy P.O. Box 64378 St. Paul, MN 55164

Integrity Funding Ohio LLC 84 Villa Road Greenville, SC 29615

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19114-7346

Jefferson Capital Systems LLC 16 McLeland Road Saint Cloud, MN 56303

JP Morgan Chase Bank 1111 Polaris Park Way Columbus, OH 43240

JP Morgan Chase Bank POB 659754 San Antonio, TX 78265

K&D Group POB 219 Willoughby, OH 44096

Kamco Financial James K. Roosa Company POB 609125 Cleveland, OH 44109

KamCo Financial Corp. 25480 Aurora Rd. Bedford Hts, OH 44146

Lapasta Tribal Lending Enterprise POB 1120 Boulevard, CA 91905

McKenzie Small Loans of Ohio, Inc. dba National Cash Advance 21638 LIbby Road Unit #432 Maple Heights, OH 44137

Money Stop 21700 Miles Rd. Cleveland, OH 44128-5000

National Cash Advance 21638 Libby Rd., Unit #432 Maple Heights, OH 44137

North Coast 20525 Center Drive Cleveland, OH 44116

Ohio Attorney General Attn: Trish Lazich 615 West Superior Ave., 11th Floor Cleveland, OH 44113

Ohio Attorney General 150 E. Gay St. 21st Floor Columbus, OH 43215

Ohio Auto Loan Services, Inc. 5739 Mayfield Road. Cleveland, OH 44124

Ohio Department Of Taxation Attn: Bankruptcy Division PO Box 530 Columbus, OH 43216

Ohio Neighborhood Finance, Inc, 5750 Chevrolet Blvd. Parma, OH 44130

Ohio Neighborhood Finance, Inc. dba Cashland 17 Triangle Park Drive Cincinnati, OH 45246 Ohio's First Class Credit Union PO Box 5877 Cleveland, OH 44101-0877

Ohio's First Class Credit Union Attn: Bankruptcy Po Box 5877 Cleveland, OH 44101

PNC Bank
PO Box 609
Pittsburgh, PA 15238-9738

Powers, Friedman & Linn 23240 Chagrin Blvd, Suite 180 Shaker Heights, OH 44122

Progressive Finance 11629 South 700 East, Suite 250 Draper, UT 84020

Receivables Performance Mgmt Attn: Bankruptcy Po Box 1548 Lynnwood, WA 98036

Revenue Group 3700 Park East Dr., Ste 240 Beachwood, OH 44122

Southwest Credit Systems, L.P. 4120 International Pkwy, Ste 1100 Carrollton, TX 75007-1958

Sprint PO Box 1259 Dept 98696 Oaks, PA 19456

Sterling Jewelers, Inc. Attn: Bankruptcy Po Box 1799 Akron, OH 44309 Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

T-Mobile %Diversified Consultants, Inc. POB 551268 Jacksonville, FL 32256

U.S. Department of Justice Tax Division PO Box 55 - Ben Franklin Station Washington, DC 20044

UH Case Medical Center POB 90144 Cleveland, OH 44190

UHHS Bedford Medical Center PO Box 74629 Cleveland, OH 44190

United States Attorney Carl B. Stokes U.S. Courthouse 801 Superior Ave., Ste 400 Cleveland, OH 44113

Visa Ofccu P.o. Box 5877 Cleveland, OH 44101

West Asset Management, Inc. POB 790113 Saint Louis, MO 63179

Woodforest National Bank PO Box 7889 The Woodlands, TX 77387-7889

Woodforest National Bank Attn: Loan Dept. PO Box 7889 Spring, TX 77387-7889 Woodforest Natural Bank PO Box 7889 Woodlands, TX 77387